

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1528 OF 2801

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

DNC Services Corp./Dem. Nat'l Committee

Full Name (Last, First, Middle Initial)

A. Chris Moody

Mailing Address 1012 16th Street

City State Zip Code
 Miami Beach FL 33139

FEC ID number of contributing
federal political committee.

C

Name of Employer
social security disability

Occupation
owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

-585.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 03 23 2015

Transaction ID : C31280989

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

B. Chris Moody

Mailing Address 1012 16th Street

City State Zip Code
 Miami Beach FL 33139

FEC ID number of contributing
federal political committee.

C

Name of Employer
social security disability

Occupation
owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

-585.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 03 23 2015

Transaction ID : C31280993

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

C. Richard E Moon

Mailing Address 133 Union Ave

City State Zip Code
 Bala Cynwyd PA 19004-3029

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation
retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 03 10 2015

Transaction ID : C31227794

Amount of Each Receipt this Period

340.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

375.00